

# The Importance of an **Always-on** **Solution** for Medicare Advantage Age-In Acquisition

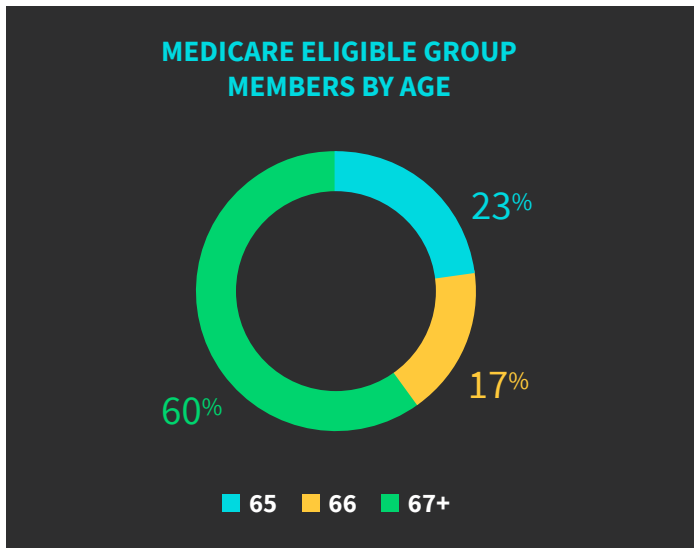


## Executive Summary

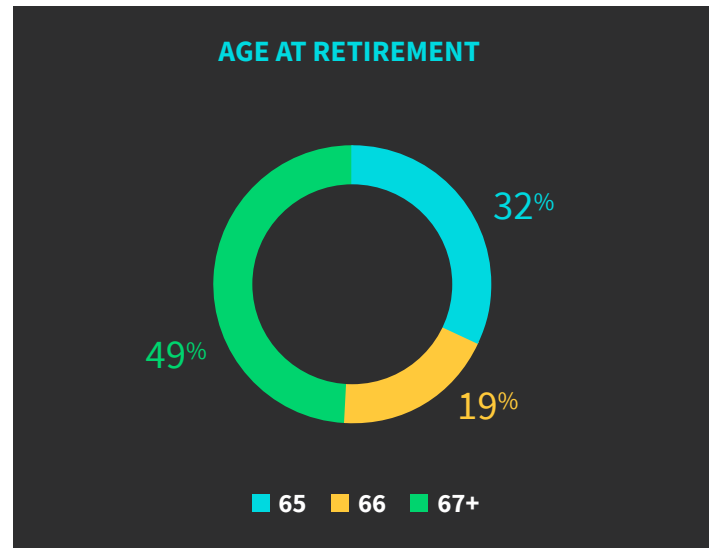
A member's decision to retire is a complex one, so is the decision to choose their health coverage in retirement. The majority of members will retire well after 65 and will take their time deciding on their preferred health plan. The traditional strategy of providing members with all the plan information just before AEP is no longer an effective strategy. To improve Medicare Advantage (MA) age-in acquisition rates it's important to support members throughout their decision-making process and understand that, for many members, choosing an MA plan is likely to be a slow process. An effective solution should address **When** members choose to retire, **How** they choose their plan, and **What** key factors they base their decision on. An always-on behavioral driven solution is designed to support members throughout their decision-making process. Instead of imposing a top-down timeline for MA acquisition on all members, we can adjust our outreach to support those who want to take more time to find a plan with a timeline that meets their needs.

# When?

A member's decision to retire depends on many factors, such as health conditions, financial status, personal goals, family, partners' retirement, and more. Research shows that Social Determinants of Health, Demographic data and Claims data are not enough to effectively predict a member's specific retirement date. However, claims data does show us that the vast majority of members stay with their group plan for more than a couple of years after retirement. We need to think about retirement as a process, not an event that occurs automatically at the age of 65, which has important consequences for MA acquisition solutions.



*Fig 1: Most members stay with their group plan well after Medicare eligibility*

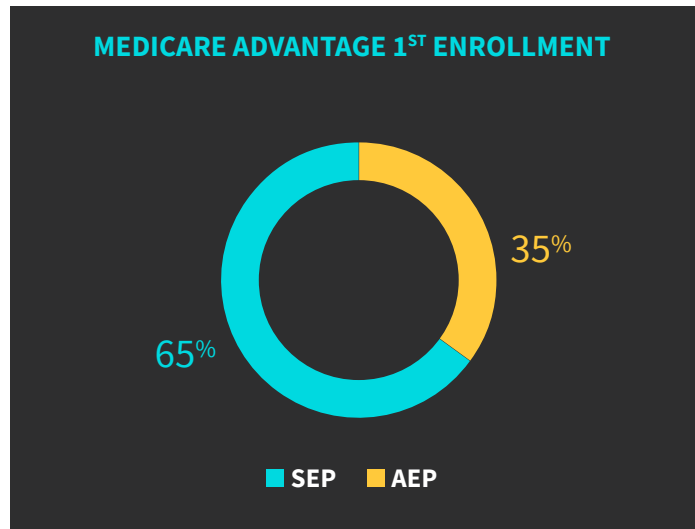


*Fig 2: Retirement is a process that takes time*

From a solution standpoint this requires plans to continue to engage their Medicare Eligible group members well after their 65th birthday. While some members will be ready to retire at 65 and will want to choose a plan in the short-term, others will need a slower persuasive approach. With those members the goal is to proactively reach out to deliver relevant content gradually, without imposing time pressure. This approach increases the likelihood that the content will be relevant, avoid abrasion, and will be matched to what they want to know at their stage of the journey toward retirement.

# How?

Most group members are used to choosing a plan that their employer has made available for them. Most have never purchased a plan as an individual. It takes members time to familiarize themselves with the Medicare Advantage terminology and to define what is important to them in choosing an individual plan. This means that most members will take their time to make a decision, and will not want to feel rushed in this process. The assumption that members just need information prior to AEP is incorrect. In reality members take their time to familiarize themselves with Medicare Advantage terminology and the different options in the market. An effective age-in solution should guide members through this decision and provide the members with relevant information as their decision-making process matures all the while ensuring that members have the plans products in mind. By using a slow persuasion through an 'always-on' approach, plans can establish a positive mental connection between their plan and Medicare Advantage in the member's mind, forming a basis of trust so that the member will be likely to consult with the plan to find an MA plan when they are ready to retire.

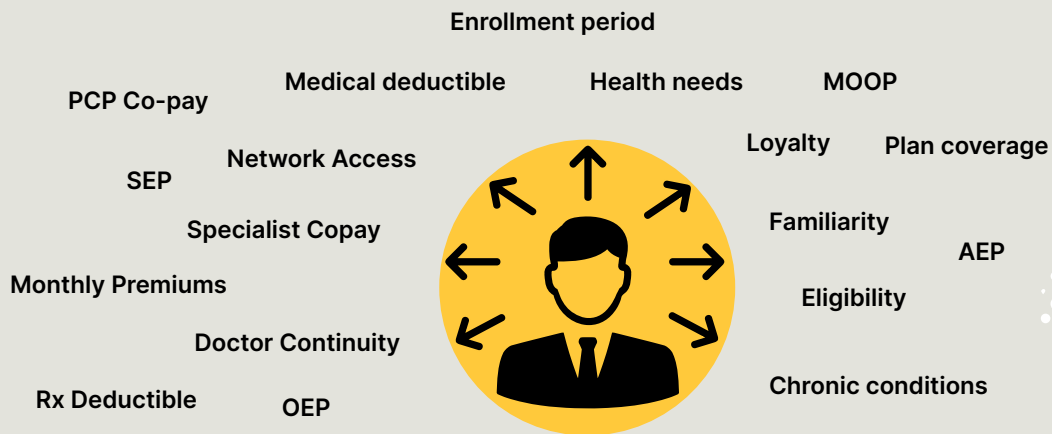


# What?

To choose an optimal Medicare Advantage plan there are many aspects to consider.

## Challenge - What most influences enrollment?

Member's key considerations to actions:



**What are the key concerns a member has when choosing their Medicare plan?**

Fig 4: Many aspects in Medicare Advantage, what really influences each member's decision?

It's extremely challenging for members to be able to familiarize themselves with all the relevant Medicare Advantage terms and compare them across all other options in the market. To solve this problem, members are likely to rely on a set of specific elements in a plan that they value most. This smaller set is much easier to familiarize and evaluate. Bombarding members with information that is not key to their decision will overload and confuse the members. This devalues communication, and may lead the member to seek more relevant information elsewhere. To improve enrollment rates, plans need to identify each member's decision factors and provide a personalized strategy accordingly. This means continuously evaluating each member as their data and health change over this time period and adjusting the strategy to fit.

# Always-on Age-In Member Acquisition Health Behavior Strategy

To support the **When**, **How** and **What** aspects of age-in acquisition Medorion has developed an always-on Medicare Advantage Behavioral Strategy. To solve the **When** aspect of enrollment the always-on approach enables plans to continuously engage their members until they choose to retire. The solution gradually delivers information over the course of each year, so members do not feel they are bombarded with information. Each communication revolves around a specific topic so members are not overwhelmed with information, addressing the **How** aspect of enrollment. Medorion's age-in decision model calculates each member's decision factors and each communication revolves around the member's most prominent decision factor. As member data changes over time so do the decision factors allowing the communications to adapt to the member's needs addressing both the **What** and the **How**.

Results to date show that running the always-on strategy can lead to a significant increase in enrollment rates, as show below.

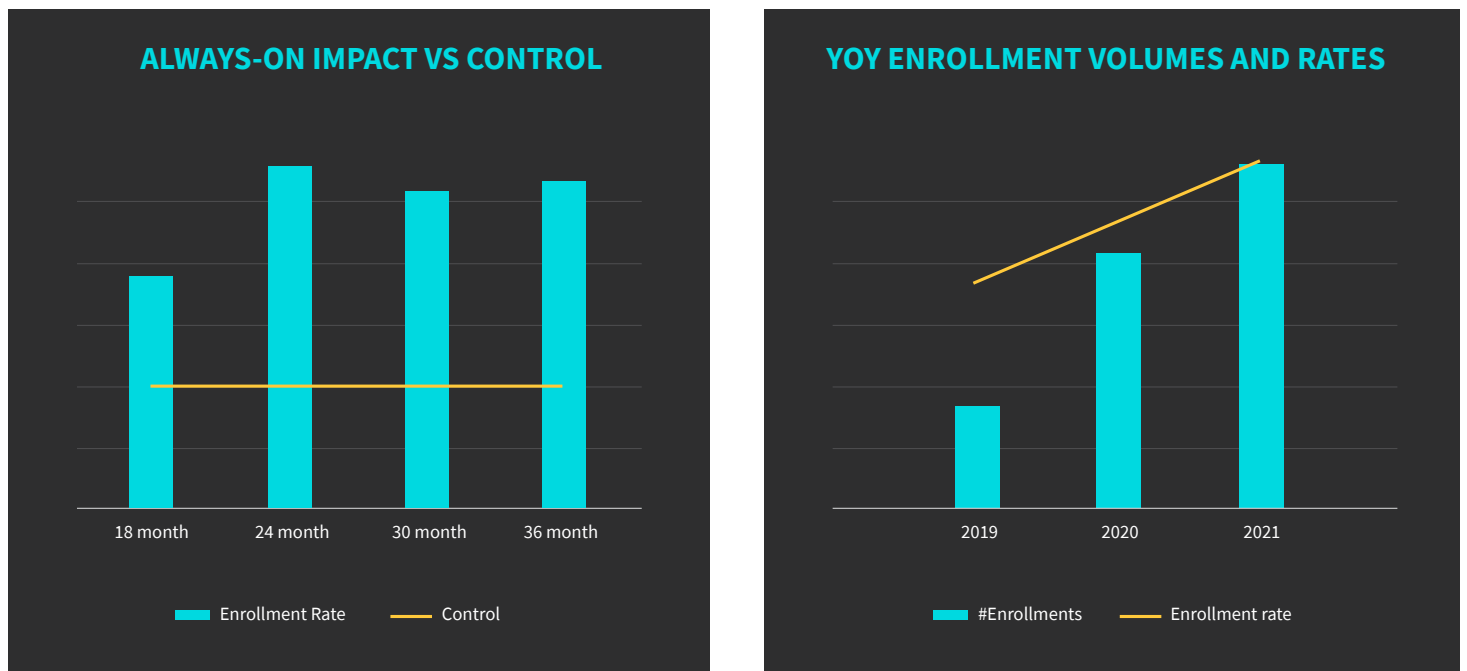


Fig 5: The longer members are exposed to personalized campaigns the higher the enrollment rates.

\* Enrollment rate - % of members that enroll in an MA plan from their current group payer